DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION*

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

APPARATUS AND METHOD FOR MODIFYING AN M-SEOUENCE WITH ARBITRARY PHASE SHIFT

APPARATUS AND METHOD FOR MODIFYING AN M-SEQUENCE WITH ARBITRARY PHASE SHIFT						
and for which a patent application: is attached hereto and includes amendment was filed in the United States on as Application with amendment(s) filed on (if applicable) was filed as PCT international Application	ation No					
I hereby state that I have reviewed and under amendment referred to above.	stand the contents of the abo	ove identif	ĭed application, including	the claims, as a	amended by any	
I acknowledge the duty to disclose informatio §1.56.	on known to me to be mater	rial to pater	ntability as defined in Title	e 37, Code of F	ederal Regulations,	
I hereby claim foreign priority benefits under certificate listed below and have also identified of the application on which priority is claime	ed below any foreign applic					
EARLIEST FOREIGN APPLIC	ATION(S), IF ANY, FILEI	O PRIOR T	O THE FILING DATE C	OF THE APPLI	CATION	
APPLICATION NUMBER	DATE OF FILING PRICE		IORITY AIMED			
				YES □	NO 🗆	
				YES 🗆	NO 🗆	
				YES □	NO 🗆	
I hereby claim the benefit under Title 35, Un	ited States Code, §119(e) of	f any Unite	ed States provisional appli	ication(s) listed	below.	
PROVISIONAL APPLICATION	ON NUMBER		FILING	G DATE		
60/178,817		January	28, 2000			

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information known to me which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE	STATUS			
		PATENTED	PENDING	ABANDONED	

^{*} for use only when the application is assigned to a company, partnership or other organization.

 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

				A CORPUS AND A COR		
	FULL NAME OF INVENTOR	last name Jha	first name Uma		MIDDLE NAME	
2 0 1	RESIDENCE & CITIZENSHIP	CITY STATE OR FOREIGN COUNTRY Placentia CA		COUNTRY OF CITIZENSHIP U.S.A.		
	POST OFFICE ADDRESS	STREET 534 Carnation Drive	стту Placentia	STATE OR COUNTRY CA	ZIP CODE 92870	
L	ADDRESS	SIGNATURE OF INVENTOR 201		DATE		
2 0 2	FULL NAME OF INVENTOR	Medlock	FIRST NAME Joel	D.	D.	
	RESIDENCE & CITIZENSHIP	CITY Los Gatos	STATE OR FOREIGN COUNTRY CA	COUNTRY OF CITIZENSHIP U.S.A.		
	POST OFFICE ADDRESS	STREET 15745 Shannon Road	CITY Los Gatos	STATE OR COUNTRY CA	ZIP CODE 95032	
L	ADDRESS	SIGNATURE OF INVENTOR 202	DATE	DATE		
		LAST NAME	FIRST NAME	MIDDLE NAME		
2 0 3	FULL NAME OF INVENTOR		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHII	>	
	RESIDENCE & CITIZENSHIP	CITY	STATE ON TOKENON COOKING			
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
'		SIGNATURE OF INVENTOR 203		DATE		
2 0 4	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME		
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSH	RY OF CITIZENSHIP	
	POST OFFICE	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
ADDRESS SIGNATURE OF INVENTOR 204				DATE		
	FULL NAME	LAST NAME	AME FIRST NAME		MIDDLE NAME	
2 0 5	OF INVENTOR RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSH	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY	ZIP CODE	
i i	ADDRESS	SIGNATURE OF INVENTOR 205	DATE	DATE		